added to an article of food under proper lebel declaration provided the total glutamate content of ready to serve food does not exceed 1 percent. It shall not be added to any food for use by infant below twelve months.

Maintenance of Quality Standards by Private Hospitals and Nursing Homes

1391. SHRI MANOJ BHATTACHARYA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether there are many private hospitals and nursing homes in the country which do not conform to the minimum infrastructure and quality standards;

(b) if so, the details thereof;

(c) whether his ministry is planning to envisage some strict regulatory legislations to correct the situation; and

(d) if so, by when such legislation and other administrative measures are going to be initiated?

THE MINISTER OF HEALTH AND FAMILY WELFARE (DR. C.P. THAKUR): (a) to (d) Health is a State subject under the Constitution of India and it is the responsibility of respective State/Union Territory to frame rules/ guidelines in respect of minimum infrastructure and quality standards in private hospitals and nursing homes situated in the State/Union Territory. However, there is a proposal in Ministry of Health and Family Welfare to have a legislation prescribing the minimum standards for hospitals, nursing homes and other clinical establishments in the country in view of the large scale proliferation of private clinic/nursing homes all over the country and complaints received from time to time about the quality of service provided by them. 'Health' being a State subject, proposed legislation requires the consent of two or more States. AH the State Governments have been requested to consider the proposal and take necessary steps to make available the recommendations of the State Legislatures in this regard.

Supply of standard medicines to rural health centres

1392. SHRI RAMACHANDRA KHUNTIA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government have formulated an integrated programme to provide standard medicines to all the rural health centres and other health institutions;

(b) if so, the details thereof; and

(c) the fresh steps taken/proposed to be taken by Government to ensure that every MBBS doctor serves for at least two years in rural areas after getting his degree?

THE MINISTER OF HEALTH AND FAMILY WELFARE (DR. C.P. THAKUR): (a) and (b) Yes, Sir. Government have initiated programmes to see that essential medicines reach all the Primary Health Care Institutions. Under the Reproductive and Child Health Programme the following drug kits are supplied to the health centres:

1.	Drug Kits "A" & "B'	@2 per sub-centre per annum
2.	Essential Obstetric Care Kit.	For Primary Health Centres @50% in "B' category Distt. 30% in "C category Distt.
3.	Emergency Obstetric Care Kit.	For First Referral Units @3 FRUs in *'B' category Distts,
4.	Reproductive Track Infection/Sexual Transmitted Infection Kits	For First Referral Units @ 3 FRUs in 'A' category 2 FRUs in "B' category Distts. 1 FRU in "C category Distts.

(c) The appointment and postings of doctors is entirely the responsibility of the State Govemments/UTs. They have been advised to take appropriate steps to ensure the availability of doctors in rural areas. Some State Governments have made it obligatory for doctors to work in rural areas for 2-3 years on initial appointment. Other steps taken by some States include decentralized contractual appointment of doctors in rural areas and compulsory rural service for 2-3 years a pre-requisite for entry into post-graduate medical course etc.

Pending application for medical colleges from TN

1393. SHRI S. AGNIRAJ: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the total number of medical colleges in various branches of medicine in Tamil Nadu pending with Government for approval, district-wise;

.(b) by when they are likely to be cleared;

(c) the reasons for the delay in clearance; and